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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/656,409	
	Filing Date	September 6, 2000	
	First Named Inventor	Scott S. Campbell et al.	
	Group Art Unit	3738	
	Examiner Name	William H. Matthews	
Total Number of Pages in This Submission		Attorney Docket Number	19603/1656

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (3-Month) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gunnar G. Leinberg, Esq. Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1014 Fax: (585) 263-1600
Signature	
Date	July 20, 2004

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PATENT  
Docket No.: 19603/1656 (CRF D2093C)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Scott S. Campbell and Patricia J. Murphy	)	Examiner:
			)	William H. Matthews
Serial No.	:	09/656,409	)	
			)	Art Unit:
Cnfrm. No.	:	9516	)	3738
			)	
Filed	:	September 6, 2000	)	
			)	
For	:	NON-OCULAR CIRCADIAN CLOCK	)	
		RESETTING IN HUMANS	)	

**AMENDMENT**

**Mail Box:**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the July 8, 2004 Notice of Non-Compliant Amendment, please amend the above-identified patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 3 of this paper.

An **Appendix** is attached following page 7 of this paper including a supplemental information disclosure statement, PTO 1449 form and new copies of all foreign applications and other documents originally submitted with the information disclosure statement filed on October 27, 2003.